

Exhibit A

Allstate Texas Lloyd's

A Lloyd's Company

8701 N. Freeport Pkwy. Irving, TX 75063 -1908

AMENDED - 06/23/11**Texas HO-A-Plus Homeowners
Declarations Page****Summary****Allstate Classic****NAMED INSURED /****MAILING ADDRESS**Ismael &/Or Marta Flores
3503 Del Norte St.
Mission TX 78574 -8686**YOUR ALLSTATE AGENT IS:**H Dominguez Agy Inc
2005 N Conway #A
Mission TX 78572**CONTACT YOUR AGENT AT:**

(956) 581-8822

POLICY NUMBER

9 44 191432 04/28

POLICY PERIODEffective date: Apr. 28, 2011
Expiration date: Apr. 28, 2012
at 12:01 A.M. standard time
at the location of the Residence Premises/Dwelling**PREMIUM PERIOD**Apr. 28, 2011 to Apr. 28, 2012
at 12:01 A.M. standard time**Residence Premises / Dwelling**3503 Del Norte St.,
Mission, TX 78574 -8686**Addition****Lot Block**

2 1/4 MILE NORTH BENTSEN PALM DRIVE LOT #19, DEL NORTE SUBD.

AGENCY AT Mission,TX**AGENT** H Dominguez Agy Inc**Total Premium for the Premium Period** *(Your bill will be mailed separately)*

Premium for Property Insured \$927.85

Recoupment Fee Vol Rural Fire Dept Assistance Prg \$5.96

TOTAL POLICY PREMIUM **\$933.81**

PROP *510004211062453052060302*

Information as of
June 23, 2011**Page 1**

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Policy Number: **9 44 191432 04/28** Your Agent: **H Dominguez Agy Inc (956) 581-8822**
 For Premium Period Effective: **Apr. 28, 2011** **Allstate Classic**

COVERAGES	LIMITS OF LIABILITY	PREMIUM
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(Other Coverages, Limits and Exclusions apply - Refer to your Policy)

SECTION I	PROPERTY	
Coverage A.	Dwelling	\$179,971
	Other Structures	\$17,997
Coverage B.	Personal Property	\$71,988
	Personal Property Off Premises	\$7,199
SECTION II	LIABILITY	
Coverage C.	Personal Liability (Each Occurrence)	\$100,000
Coverage D.	Medical Payments to Others (Each Person)	\$2,000
	Loss of Use Coverage	\$35,994
	Limited Fungi, Other Microbes or Rot Remediation	\$5,000
BASIC PREMIUM		\$912.85
Increased Liability Limits Premium		\$9.00

OTHER COVERAGES AND ENDORSEMENTS	LIMITS OF LIABILITY	PREMIUM
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HO-105 (7-8-92) Residence Glass Coverage		\$6.00
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DEDUCTIBLES (SECTION I ONLY)	AMOUNT OF DEDUCTIBLE	DEDUCTIBLE ADJUSTMENT PREMIUM
Deductible Clause 1.1 - Windstorm and Hail	\$1,799.00	Included
	1.0%	
Deductible Clause 1.2 - Tropical Cyclone	\$3,599.00	
	2.0%	
Deductible Clause 2 - All Other Perils	\$1,799.00	Included
	1.0%	

The Deductible Adjustment Premium amount is combined for Deductible Clause 1.1 and Deductible Clause 1.2.

TOTAL POLICY PREMIUM	\$933.81
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